



COUNTY OF SAN BERNARDINO  
STANDARD PRACTICE

NO 3-2.10

ISSUE 1-22-02

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BY Joyce Lewis

EFFECTIVE 7/94

APPROVED

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DEPARTMENT

BEHAVIORAL HEALTH

SUBJECT

CONFLICT OF INTEREST

**I. PURPOSE**

- A. To formulate basic departmental rules specifying the kinds of outside employment, which are inconsistent and incompatible with employment in the Department of Behavioral Health.
- B. To inform Department of Behavioral Health (DBH) employees and volunteers of the conflict of interest ruling by the Attorney General of the State of California.
- C. To prevent situations wherein certain individuals may realize a personal, financial or similar benefit by virtue of their position in "government."
- D. To avoid the appearance of, actual or potential, conflict of interest between county employment and Department of Behavioral Health staff's private practice/outside employment.

**II. POLICY**

**A. SELF REFERRALS**

- 1. Review by the Attorney General has disclosed potential conflict of interest inherent in the practice of self-referral. It is the position of DBH that referral by a therapist of a DBH patient seen while the therapist is in public employ to a service in which the therapist has a personal interest creates a conflict of interest.
- 2. No person employed by or under contract to DBH or a volunteer with DBH may refer a DBH patient to his or her private practice or to the private practice of another therapist in the system or to any practice in which the employee has a financial interest. Department of Behavioral Health staff shall not accept into their private practices DBH client referrals from other DBH staff.

**B. PRIVATE PRACTICE/NON-COUNTY GOVERNMENT**

- 1. Administrative, management, treatment and case management staff and volunteers of DBH shall not work/practice/consult privately at a facility (including hospitals and contract agencies) which DBH utilizes for its clients.

This restriction applies across age groups served by the Department of Behavioral Health (e.g., staff who work in a DBH program which serve adults may not work in a placement facility that the Department of Behavioral Health uses for children).

2. DBH staff may not provide therapy, consultation or treatment plans for DBH clients other than in their capacity as DBH staff. If a Department of Behavioral Health staff's private/contracted client becomes a county client, staff must terminate the private relationship.
3. A DBH employee serving as a staff member for a non-contract facility which begins accepting DBH referrals or enters into a contract with the County, must terminate his/her employment with that agency or request a waiver as specified in III, C.
4. No administrative, management, treatment, or case management staff assigned to San Bernardino County Jail facilities may accept referrals to conduct PC 1368, PC 1368.1 or PC 1026 evaluations unless approved by the appropriate Deputy Director.
5. DBH staff may not engage in any activity which involves the use of County time or facilities, equipment or supplies for private gain or advantage.
6. DBH staff may not engage in activity which involves the use for private gain or advantage of the uniform, prestige, or influence of the individual's County employment, including using County employment to contact and/or solicit clients for any private practice.
7. DBH staff may not engage in any outside employment involving time demands/schedules which negatively impacts the performance of his/her County duties.
8. Employment at a facility specifically licensed for developmentally disabled clients is exempt from the policy.

#### C. RECEIPTS OF GIFTS

1. DBH employees must report all gifts with a value of \$50.00 or more received from contractors, potential contractors or interested parties, business enterprises, or other organizations.

### III. PROCEDURE

- A. Administrative, management, treatment and case management staff and volunteers must complete a "Conflict of Interest Disclosure Statement" form (see Attachment 1) annually and submit it to their Deputy Director/Chief/Assistant Director via their immediate supervisor and program manager by **January 10** of each year. This Disclosure Statement will be placed in the employee's personnel file.

If an employee or volunteer obtains outside employment or changes his or her current outside employment, he or she shall be responsible for submitting a new Disclosure Statement within ten (10) days of the change in outside employment status.

Failure to submit or refusal to submit a Conflict of Interest Form timely may result in disciplinary action up to and including dismissal

- B. A specific circumstance can be waived only if no actual conflict exists hereunder if approved, in advance, in writing by the Director/Assistant Director/Deputy Director of San Bernardino County Department of Behavioral Health. An employee may initiate a request for a waiver by memo via his or her clinic supervisor and program manager to the appropriate Deputy Director. A copy of the waiver shall be placed in the employee's personnel file or volunteer file, as appropriate.

- C. If it is determined that a conflict of interest does exist, Department of Behavioral Health employees will be notified of this determination by certified letter signed by the appropriate Deputy Director/Assistant Director/Chief. A copy of the letter will be sent to Behavioral Health Personnel to be filed in employee's personnel file. The individual will have 30 days from receipt of the letter in which to come into compliance with this policy.

If the employee does not take action to eliminate the conflict with 30 days, DBH shall take disciplinary action consistent with County Personnel Rules, including applicable appeal procedures.

- D. If it is determined that a conflict of interest does exist, the pertinent provisions of Government Code Section 87100 et seq. would apply and be enforced by DBH

**San Bernardino County Department of Behavioral Health****CONFLICT OF INTEREST DISCLOSURE STATEMENT**       **Annual Disclosure**       **Update Disclosure**

In compliance with California Government Code Section 1125-1127, the following form must be completed by all Department of Behavioral Health employees or volunteers. The Department's rules are stated in DBH Policy No. 3-2.10, entitled A Conflict of Interest. According to this policy, you are required to disclose in writing any outside employment or activity for compensation which relates to your county duties or to the functions and responsibilities of your department, office or agency.

Employee Name \_\_\_\_\_ DBH Position/Title \_\_\_\_\_  
 DBH Job Site/Facility Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

       **I HAVE NO PAID EMPLOYMENT WITH ANY HUMAN SERVICES ORGANIZATIONS OTHER THAN SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH.**

**Outside Employment.** Please list below all current paid employment with human services organizations outside of the San Bernardino County Department of Behavioral Health. Indicate self-employment, if applicable.

1     Employer/Organization \_\_\_\_\_ Phone \_\_\_\_\_  
       Employer Address \_\_\_\_\_  
       \_\_\_\_\_

Type of service/organization \_\_\_\_\_  
 Position Title \_\_\_\_\_  
 Briefly describe job duties \_\_\_\_\_  
 \_\_\_\_\_

2     Employer/Organization \_\_\_\_\_ Phone \_\_\_\_\_  
       Employer Address \_\_\_\_\_  
       \_\_\_\_\_

Type of service/organization \_\_\_\_\_  
 Position Title \_\_\_\_\_  
 Briefly describe job duties \_\_\_\_\_  
 \_\_\_\_\_

If additional space is needed, please attach a sheet to this form.

**I hereby certify that all statements made in this disclosure form are true and complete to the best of my knowledge. I understand that any false statements or relevant omissions may subject me to disqualification or disciplinary action.**

\_\_\_\_\_  
 EMPLOYEE SIGNATURE

\_\_\_\_\_  
 DATE